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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on	Justin		Jessica
your government-issued picture identification (for	First name		First name
example, your driver's	G.		L.
	Middle name		Middle name
Bring your picture identification to your meeting with the trustee.	Abraham		Abraham
	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0893		xxx-xx-7843
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Abraham Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Justin First name G. Middle name Abraham Last name and Suffix (Sr., Jr., II, III)	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Abraham Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number XXX-XX-0893

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Justin G. Abraham Debtor 1 Debtor 2 Jessica L. Abraham

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.				
Include trade names and doing business as names	Business name(s)	Business name(s)				
	EINs	EINs				
Where you live	1417 Plantain Drive	If Debtor 2 lives at a different address:				
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
	Grundy					
	County	County				
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)				
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or Elns. Business name or Elns.				

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Case number (if known)

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Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being ☐ Yes. filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When District Case number, if known Do you rent your Go to line 12. ■ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Debtor 2

Justin G. Abraham

Jessica L. Abraham

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Justin G. Abraham Debtor 1 Debtor 2 Jessica L. Abraham

Case number (if known)

Part	Report About Any Bu	sinesses	You Owi	n as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	III- or part-time ■ No. Go to Part 4.			
		☐ Yes.	Nam	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Nam	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Num	ber, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small	deadline	s. If you ins, cash- S.C. 1116	ndicate that you are flow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	☐ Yes.	What is	the hazard?	
				diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where	is the property?	
	○ · · · · · · · · · · · · · · · · · · ·				Number, Street, City, State & Zip Code

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Debtor 1 **Justin G. Abraham** Debtor 2 **Jessica L. Abraham**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15.	Tell the court whether
	you have received a
	briefing about credit
	counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

П

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 2 Jessica L. Abraham				Case nur	Case number (if known)		
Part	6: Answer These Questi	ons for Re	eporting Purposes				
	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ow	ve that are not consumer debts or bus	iness debts		
	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
			■ No				
			☐ Yes				
	How many Creditors do you estimate that you owe?	■ 1-49		1 ,000-5,000	1 25,001-50,000		
		□ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000		
	How much do you	\$ 0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	+ , -	01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ \$10,000,000;001 - \$50 billion		
Part	7: Sign Below						
For y	y ou	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in c bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C 1519, and 3571.					specified in this petition.		
		/s/ Justi	n G. Abraham	/s/ Jessica L			
			G. Abraham of Debtor 1	Jessica L. Al Signature of De			
		Executed	on March 2, 2016	Executed on	March 2, 2016		

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Debtor 1 Justin G. Abraham
Debtor 2 Jessica L. Abraham

Case number (if known)

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel Signature of Attorney for Debtor	Date	March 2, 2016 MM / DD / YYYY	
David M. Siegel Printed name			
David M. Siegel & Associates Firm name			
790 Chaddick Drive Wheeling, IL 60090			
Number, Street, City, State & ZIP Code Contact phone (847) 520-8100	Email address		
#06207611			

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	Case 10-07199	Doc 1 Filed 03/0		.35.22 Desc Maiii 3/02/16 9:35AM
Fill in this i	nformation to identify you	r case:		
Debtor 1	Justin G. Abraha	am		
	First Name	Middle Name	Last Name	_
Debtor 2	Jessica L. Abrał	nam		
(Spouse if, filing) First Name	Middle Name	Last Name	_
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	-
(if known)	,			☐ Check if this is an
(amended filing
	Form 106Sum	and Liabilities are	nd Certain Statistical Infor	mation 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	26,000.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,035.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	25,218.00
	Your total liabilities	\$	50,253.00
Par	13: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,818.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,215.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	hedules.
7.	Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 2 Jessica L. Abraham Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 5,801.00 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Desc Main Case 16-07199 Doc 1 Filed 03/02/16 Entered 03/02/16 09:55:22 Document Page 10 of 57 Fill in this information to identify your case and this filing: Debtor 1 Justin G. Abraham Middle Name Last Name First Name Debtor 2 Jessica L. Abraham (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one. 3 1 Make: the amount of any secured claims on Schedule D: **Equinox** ☐ Debtor 1 only Creditors Who Have Claims Secured by Property. 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$14.150.00 \$14,150.00 Secured Lien \$25,035.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Jeep Who has an interest in the property? Check one. 3.2 Make: the amount of any secured claims on Schedule D: **Compass** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2007 Debtor 2 only Current value of the Current value of the

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

(see instructions)

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this is community property

■ No

Approximate mileage:

Other information:

☐ Yes

portion you own?

\$2,200,00

entire property?

\$2,200,00

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	otor 1 otor 2	Justin G. A Jessica L.		Document		case number (if known)	
					s from Part 2, including a		\$16,350.00
Part	3: Des	scribe Your Pers	sonal and Household Iten	ns			
Do	you ow	n or have any	legal or equitable int	erest in any of the foll	lowing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[Example ⊐ No	old goods and es: Major applia	I furnishings ances, furniture, linens,	china, kitchenware			
			Household Good	ds & Furniture			\$1,200.00
[□No	es: Televisions	and radios; audio, vide ell phones, cameras, m		quipment; computers, print	ters, scanners; music co	ollections; electronic devices
			TV & Electronics	3			\$500.00
9. E	■ No □ Yes. Equipme Example ■ No □ Yes. Firearn Examp	other collection other collection Describe ent for sports es: Sports, pho musical ins Describe ns ples: Pistols, rifle	and hobbies tographic, exercise, and	d other hobby equipme	nt; bicycles, pool tables, g	,	or baseball card collections; and kayaks; carpentry tools;
11.	Clothes Examp ☐ No		clothes, furs, leather co	ats, designer wear, sho	oes, accessories		\$800.00
13.	■ No □ Yes. Non-far Examp □ No	oles: Everyday j Describe rm animals oles: Dogs, cats		y, engagement rings, w	vedding rings, heirloom jev	velry, watches, gems, go	old, silver
	Yes.	Describe	2 aata				¢ ፍለ ለለ
	Any oth	ner personal a	2 cats	ou did not already lis	it, including any health a	ids you did not list	\$50.00

☐ Yes. Give specific information.....

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Debt Debt		Justin G. Abra Jessica L. Abr		Case number (if known)	
				3, including any entries for pages you have attached	\$2,550.00
Part 4	1: Desc	ribe Your Financia	I Assets		
Do y	ou own	or have any leg	al or equitable interest in any	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example No		ve in your wallet, in your home,	in a safe deposit box, and on hand when you file your petiti	on
				s; certificates of deposit; shares in credit unions, brokerage h the same institution, list each.	houses, and other similar
_				Institution name:	
			Checking/Savings 17.1. Account	Harris Bank	\$1,900.00
□ □ 19. N	Example No Yes Non-pub	es: Bond funds, in	Institution or issuer nam	age firms, money market accounts ne: ed and unincorporated businesses, including an interes	st in an LLC, partnership,
	No		mation about them Name of entity:	% of ownership:	
	Negotial Non-neg No	ole instruments in notiable instrumer	clude personal checks, cashier	ole and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	Example No	ent or pension a es: Interests in IR. st each account	A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
			Type of account: 401(k)	Institution name: ERISA Qualified	\$4,000.00
Ì	Your sha		deposits you have made so that	nt you may continue service or use from a company lic utilities (electric, gas, water), telecommunications compa	nies, or others
-	Yes		Pontal donosit	Institution name or individual:	\$1 200 0 0
			Rental deposit	Security Deposit	\$1,200.00
	No Yes	lssu	er name and description.	you, either for life or for a number of years)	
24. In	terests	in an education	IRA, in an account in a quali	fied ABLE program, or under a qualified state tuition pro	ogram.

Best Case Bankruptcy

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32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

Case 16-07199 Doc 1 Filed 03/02/16 Entered 03/02/16 09:55:22 Desc Main Document Page 14 of 57 Debtor 1 Justin G. Abraham Jessica L. Abraham Debtor 2 Case number (if known) ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No \square Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$7,100.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$16,350.00 57. Part 3: Total personal and household items, line 15 \$2,550.00 Part 4: Total financial assets, line 36 \$7,100.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$26,000.00 Copy personal property total \$26,000.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$26,000.00

Official Form 106A/B Schedule A/B: Property page 5

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Page 15 of 57 Document Fill in this information to identify your case: Debtor 1 Justin G. Abraham Middle Name Last Name First Name Debtor 2 Jessica L. Abraham (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim	n Specific laws that allow exemption
Copy the value from Schedule A/B	Check only one box for each exempti	on.
\$14,150.00	\$2,400	735 ILCS 5/12-1001(c)
\$2,200.00	\$2,400	735 ILCS 5/12-1001(c)
\$1,200.00	\$1,200	0.00 735 ILCS 5/12-1001(b)
	· ·	•
\$500.00	s \$500	735 ILCS 5/12-1001(b)
\$800.00	■ \$800	735 ILCS 5/12-1001(a)
	□ 100% of fair market value,	un to
	\$14,150.00 \$1,200.00 \$500.00	\$14,150.00 \$14,150.00 \$2,400 100% of fair market value, any applicable statutory lim \$1,200.00 \$1,200.00 \$1,00% of fair market value, any applicable statutory lim \$1,200.00 \$1,00% of fair market value, any applicable statutory lim \$1,00% of fair market value, any applicable statutory lim \$1,00% of fair market value, any applicable statutory lim \$500.00 \$500.00 \$800.00 \$800.00

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Debtor 2 Jessica L. Abraham Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2 cats 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit **Checking/Savings Account: Harris** 735 ILCS 5/12-1001(b) \$1,900.00 \$1,900.00 Bank Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): ERISA Qualified 735 ILCS 5/12-1006 \$4,000.00 \$4,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Rental deposit: Security Deposit 735 ILCS 5/12-1001(b) \$1,200.00 \$1,200.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit **Term Life Insurance** 215 ILCS 5/238 \$0.00 \$0.00 **Death Benefit Only** Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

Case 16-07199 Doc 1 Filed 03/02/16 Entered 03/02/16 09:55:22 Desc Main Page 17 of 57 Document Fill in this information to identify your case: Debtor 1 Justin G. Abraham Middle Name First Name Last Name Debtor 2 Jessica L. Abraham Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much Value of collateral Unsecured Amount of claim as possible, list the claims in alphabetical order according to the creditor's name. that supports this Do not deduct the portion value of collateral. claim If anv Pnc Bank Describe the property that secures the claim: \$25,035.00 \$14,150.00 \$10,885.00 Creditor's Name 2013 Chevrolet Equinox **PNC** Secured Lien \$25,035.00 As of the date you file, the claim is: Check all that 2730 Liberty Ave Pittsburgh, PA 15222 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Judgment lien from a lawsuit **Purchase** ☐ Check if this claim relates to a Other (including a right to offset) community debt Money Security Opened 7/31/15 **Last Active** 4392 Last 4 digits of account number Date debt was incurred 8/01/15 \$25,035.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$25,035.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name Addres	S
-------------	---

-NONE-

On which line in Part 1 did you enter the creditor?

Last 4 digits of account number

Official Form 106D

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Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
 - □ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☐ Other. Specify

- Yes.
- 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Child Support

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Document Debtor 1 Justin G. Abraham Case number (if know) Debtor 2 Jessica L. Abraham **Total claim** 4.1 259.00 A T Dental, Dr T M Patel Dds 5942 Last 4 digits of account number \$ Nonpriority Creditor's Name When was the debt incurred? Attn:Bankruptcy 1507 Jefferson St Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collections Other. Specify 4.2 **ACL Laboratories** 1689 247.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 27901 When was the debt incurred? Opened 11/01/13 West Allis, WI 53227 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated ■ Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collections Other. Specify 4.3 **ACL Laboratories** 55.00 1770 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred?

PO Box 27901

West Allis, WI 53227

Number Street City State Zlp Code

Opened 11/01/13

As of the date you file, the claim is: Check all that apply

Official Form 106 E/F

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Debtor Debtor	1 Justin G. Abraham2 Jessica L. Abraham	Doodment 1 age	Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only	□ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt				
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify	ctions		
4.4	Assoc. Pathologists of Joliet Nonpriority Creditor's Name	Last 4 digits of account number	4540	\$	84.00
	Attn:Bankruptcy 333 Madison Street	When was the debt incurred?	Opened 1/01/13		
	Joliet, IL 60435 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify	ctions		
4.5	Assoc. Pathologists of Joliet	Last 4 digits of account number	4524	\$	84.00
	Nonpriority Creditor's Name	Last 4 digits of account number	4024	Ψ	
	Attn:Bankruptcy 333 Madison Street	When was the debt incurred?	Opened 1/01/13		
	Joliet, IL 60435 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	_ commgon			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify	ctions		
4.6	AT&T	Last 4 digits of account number	0774	\$	135.00
	Nonpriority Creditor's Name	<u> </u>			

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Debtor 1	Justin G. Abraham Jessica L. Abraham	Case number (if know)				
	Bankruptcy Dept 6021 S. Rio Grande Ave, 1st	When was the debt incurred?	Opened 12/01/13			
	Orlando, FL 32809-4613 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify				
4.7	Chasecard	Last 4 digits of account number	7640	\$	1,595.00	
	Nonpriority Creditor's Name Bankruptcy Department PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 7/01/08 Last Active 12/29/13			
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	□ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did			
	■ No □ Debts to pension or profit-sharing plans, and other si		g plans, and other similar debts			
	Yes	Other. Specify	ases			
4.8	comenity	Last 4 digits of account number	4746	\$	1,485.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182686 Columbus, OH 43218	When was the debt incurred?	Opened 7/01/08 Last Active 12/28/13	·		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			

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Debto Debto		Document Fage	Case number (if know)		
Dobio					
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt	☐ Gladent loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify	nases		
4.9	Comenity Bank/Torrid	Last 4 digits of account number	8033	\$	1,204.00
	Nonpriority Creditor's Name	ū	Onemad 4/04/40 Loot	· 	
	Attention: Bankruptcy Po Box 182686 Columbus, OH 43218	When was the debt incurred?	Opened 4/01/12 Last Active 11/14/13		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only				
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing			
	Yes	Other. Specify Purchases			
4.10	Comenitycapital/dvdsbr	Last 4 digits of account number	9561	\$	1,043.00
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ	1,040.00
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	Opened 5/01/11 Last Active 11/14/13		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only	□ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify	nases		
4.11	Comenitycapital/prdsgn	Last 4 digits of account number	4346	\$	1,400.00
	Nonpriority Creditor's Name	Lust 4 digits of account number		Ψ	.,

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Document Page 23 of 57 Debtor 1 Justin G. Abraham Case number (if know) Debtor 2 Jessica L. Abraham Opened 5/01/12 Last 4590 E Broad St When was the debt incurred? Active 11/14/13 Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.12 **Credit One** 5004 370.00 Last 4 digits of account number \$ Nonpriority Creditor's Name Opened 7/01/15 Last **Bankrupcty Department** PO Box 98873 When was the debt incurred? Active 9/09/15 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify

4.13 First Premier Bank

Nonpriority Creditor's Name

Bankruptcy Department PO Box 5523

Sioux Falls, SD 57117

Number Street City State Zlp Code

3425 Last 4 digits of account number

When was the debt incurred?

Opened 8/01/13

As of the date you file, the claim is: Check all that apply

448.00

\$

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Debtor Debtor		Document 1 age	Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	_ commgon			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?		aration agreement or divorce that you did		
	■ No	not report as priority claims Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	·	ctions		
4.14	Fox River Foot Ankle Cente	Last 4 digits of account number	3620	\$	341.00
	Nonpriority Creditor's Name 3963 US-34 Oswego, IL 60543	When was the debt incurred?	Opened 11/01/14		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	No	☐ Debts to pension or profit-shari			
	Yes	Other. Specify	ction		
4.15	High Tech Medical Park	Last 4 digits of account number	 1811	\$	115.00
	Nonpriority Creditor's Name	W/	One and 2/04/42	· 	
	11800 Southwest Hwy Suite 1	When was the debt incurred?	Opened 3/01/13		
	Palos Heights, IL 60463 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify	ction		
4.16	Hinsdale Orthopaedics Nonpriority Creditor's Name	Last 4 digits of account number	1248	\$	204.00

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tor 2 Jessica L. Abraham		Case number (if know)	
Attn: Medical Records Billing 951 Essington Rd. Joliet, IL 60435	When was the debt incurred?	Opened 6/01/15	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	_ commigant		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify	etions	
Kohl/Cap1	Last 4 digits of account number	0448	\$ 215.00
Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?	Opened 4/01/15 Last Active 6/29/15	
Sioux Falls, SD 57117	when was the debt incurred?	Active 6/29/13	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only			
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify	ases	
Morris Hospital	Last 4 digits of account number	2007	\$ 313.00
Nonpriority Creditor's Name 150 W. High Street	When was the debt incurred?	Opened 2/01/14	
Morris, IL 60450 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Collection	ctions	

Debtor 1 Justin G. Abraham

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Northwestern Medical	Last 4 digits of account number 2094	\$	1,054.00
Nonpriority Creditor's Name Professional Billing Dept 680 North Lake Shore Dr. Ste 100 Chicago, IL 60611	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Medical		
Northwestern Memorial Hospital	Last 4 digits of account number 6927	\$	0.0
Nonpriority Creditor's Name PO Box 73690 Chicago, IL 60673-7690	When was the debt incurred? 12/14		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify NOTICE ONLY		
Palos Community Hospital	Last 4 digits of account number	\$	2,500.0
Nonpriority Creditor's Name 777 Oakmont Lane	When was the debt incurred?	_	
Suite 1600 Westmont, IL 60559-5577			

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			Document	Page 27 of 57	
Debtor 1	Justin G. Abraham				

Debtor	Jessica L. Abraham		Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only	co.ngo.n.			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	_			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medic	al		
4.22	Pro-Motion Physical Therapy	Last 4 digits of account number	2453	\$	185.00
	Nonpriority Creditor's Name 1010 S Ridge Road	When was the debt incurred?		·	
	Minooka, IL 60447-8810 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 2 only	<u> </u>			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Medic	al		
4.23	Target NB	Last 4 digits of account number	9149	\$	11,882.00
	Nonpriority Creditor's Name CCS Gray OPS Center PO Box 6497 Signar Falls SD 57447	When was the debt incurred?	Opened 9/01/06 Last Active 11/14/13		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Purch	ases		

Part 3: List Others to Be Notified About a Debt That You Already Listed

3/02/16 9:35AM

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have

	Justin G. Abraham Jessica L. Abraham		Case number (if know)					
	nan one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be not in Parts 1 or 2, do not fill out or submit this page.							
AT&T Bankrup ∣585 Wa	d Address tcy Dept. ukegan Road an, IL 60085-6727	Line 4.6 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
		Last 4 digits of account numb	er					
AT&T Bankrup 5407 And	d Address tcy Dept. drew Highway , TX 79706	Line 4.6 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
		Last 4 digits of account numb	oer					
Cda/pon Attn:Bar Po Box 2	nkruptcy	On which entry in Part 1 or Part Line 4.18 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
		Last 4 digits of account numb	per					
Collectic Po Box 4	d Address on Prof/lasalle 416 , IL 61301	On which entry in Part 1 or Pation 4.14 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
•		Last 4 digits of account number						
Enhance Attention 8014 Bay	d Address ed Recovery Corp n: Client Services yberry Rd ville, FL 32256	On which entry in Part 1 or Pa Line <u>4.6</u> of (<i>Check one</i>):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
	,	Last 4 digits of account numb	per					
First Pre 8820 N. I	d Address mier Bank Louise Ave. Ills, SD 57107	On which entry in Part 1 or Pation Line 4.13 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
		Last 4 digits of account number						
llinois C Ilinois C Po Box 1	d Address collection Service/ICS collection Service 1010 ark, IL 60477	On which entry in Part 1 or Part Line 4.15 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
		Last 4 digits of account number						
Kohl/Cha Store) Attn: Ba N54W 17	d Address ase(Kohl's Department nkruptcy Department 7000 Ridgewood Drive onee Falls, WI 53051	On which entry in Part 1 or Part Line 4.17 of (Check one):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
	,	Last 4 digits of account numb	per					
Name and Address On v		On which entry in Part 1 or Pa Line <u>4.16</u> of (<i>Check one</i>):	art2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
Chicago	, IL 60606	Last 4 digits of account number						

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Debtor 1 Justin G. Abraham Jessica L. Abraham	Case number (if know)				
Name and Address	On which entry in Part 1 or	Part2 did you list the original creditor?			
Midland Funding	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
2365 Northside Dr Ste 30 San Diego, CA 92108		■ Part 2: Creditors with Nonpriority Unsecured Claims			
odii 210go, 07. 02100	Last 4 digits of account nur	mber			
Name and Address	On which entry in Part 1 or	Part2 did you list the original creditor?			
State Collection Servi	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
1851 S Alverno Rd Manitowoc, WI 54220		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account nur	mber			
Name and Address	On which entry in Part 1 or	Part2 did you list the original creditor?			
Target NB	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Attn:Bankruptcy Dept. PO Box 673		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Minneapolis, MN 55440					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Last 4 digits of account number

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2	5,218.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$2	5,218.00
				L	

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Page 30 of 57 Document Fill in this information to identify your case: Debtor 1 Justin G. Abraham Middle Name Last Name First Name Debtor 2 Jessica L. Abraham (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Numbe	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_

	Case 10-0/199	Doc 1 Filed 03/0		5/02/10 09.55.22 57	3/02/16 S	9:35AN
Fill in this	s information to identify ye		int Tauc OI of	31		
Debtor 1	Justin G. Abra	ham				
D 1 / 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fili	ing) Jessica L. Abr	Anam Middle Name	Last Name			
United Sta	ates Bankruptcy Court for th	e: NORTHERN DISTRIC	Γ OF ILLINOIS			
Coop num						
Case num					☐ Check if this is an amended filing	
Officia	al Form 106H					
Sched	dule H: Your Co	debtors			12/1	5
people are fill it out, a	e filing together, both are cand number the entries in	o are also liable for any de equally responsible for sup the boxes on the left. Attac wn). Answer every question	plying correct information the control of the contr	on. If more space is need	ded, copy the Additional P	age,
1. Do	you have any codebtors?	(If you are filing a joint case,	do not list either spouse a	as a codebtor.		
■ No □ Yes						
Arizor	na, California, Idaho, Louisia . Go to line 3.	you lived in a community pana, Nevada, New Mexico, Pospouse, or legal equivalent liv	uerto Rico, Texas, Washir		ates and territories include	
in line Form	e 2 again as a codebtor or	lebtors. Do not include you nly if that person is a guara cial Form 106E/F), or Sche	ntor or cosigner. Make s	ure you have listed the	creditor on Schedule D (Of	fficia
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The creditor Check all schedules the	or to whom you owe the denat apply:	ebt
3.1				☐ Schedule D, line		
	Name			☐ Schedule E/F, line ☐ Schedule G, line		
-	Number Street City	State	ZIP Code			
3.2				☐ Schedule D, line		
	Name			☐ Schedule E/F, line ☐ Schedule G, line		
-	Number Street					

State

City

ZIP Code

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Fill i	n this information to identify you	ır case:		
Deb	tor 1 Justin G.	Abraham		
	tor 2 Jessica L	Abraham		
Unit	ed States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF ILLINOIS	
Cas (If kno	e number own)		-	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Of	ficial Form 106I			13 income as of the following date: MM / DD/ YYYY
Sc	hedule I: Your In	come		12/15
supp spou	olying correct information. If y use. If you are separated and yet a separate sheet to this for	ou are married and not fili your spouse is not filing w m. On the top of any addit	ing jointly, and your spouse is living ith you, do not include information a	d Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	■ Employed□ Not employed
	employers.	Occupation	Store Manager	Account Manager
	Include part-time, seasonal, or self-employed work.	Employer's name	Moorehead Communications, Inc,.	CoWorkx Stafing
C	Occupation may include stude	nt		

Part 2: Give Details About Monthly Income

or homemaker, if it applies.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

PO Box 1870

Marion, IN 46952

6 years

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Employer's address

How long employed there?

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		Debtor 2 or -filing spouse	
2.	\$	2,912.00	\$	2,889.00	
3.	+\$	0.00	+\$	0.00	
4.	\$	2,912.00	\$	2,889.00	

440 W Boughton Road

Bolingbrook, IL 60447

2 + years

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Justin G. Abraham Debtor 1 Debtor 2 Jessica L. Abraham Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 2.912.00 2.889.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 538.00 601.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 94.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 746.00 176.00 5f. Domestic support obligations 5f. 460.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 5h. Other deductions. Specify: HIt Ac deduction 5h.+ \$ 365.00 \$ 0.00 **Life Deduction** \$ \$ 0.00 1.00 \$ 0.00 2.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. \$ 2,204.00 779.00 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$ 708.00 2,110.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** 8d. 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ 8h. 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. 708.00 \$ 2.818.00 10. Calculate monthly income. Add line 7 + line 9. \$ 2.110.00 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 11. **+**\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2.818.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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Fill	in this informa	ation to identify y	our case:						
Deb	otor 1	Justin G. Ab	raham			Ch	eck if th	nis is:	
								mended filing	
	otor 2 ouse, if filing)	Jessica L. A	braham						ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLING	OIS		MM /	DD / YYYY	
	se number nown)								
0	fficial Fo	orm 106J							
S	chedule	J: Your	Exper	ises					12/1
Be infe	as complete ormation. If n	and accurate as	s possible eeded, atta	. If two married people ar ich another sheet to this					
Par 1.	t 1: Desc Is this a joi	ribe Your House	ehold						
••	□ No. Go t								
	Yes. Do	es Debtor 2 live	in a separ	ate household?					
			et file Offic	ial Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of D	obtor 2		
				iai Fullii 1005-2, <i>Expenses</i>	Tor Separate House	erioid di D	edioi 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list Dand Debtor		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			ependent's ge	Does dependent live with you?
	Do not state								□ No
	dependents	names.							☐ Yes ☐ No
									☐ Yes
									□ No
									☐ Yes
									□ No
3.	expenses of	penses include of people other t ad your depende	than 🗂	No Yes					☐ Yes
Est exp app	t 2: Estin timate your e penses as of plicable date.	nate Your Ongoi xpenses as of y a date after the es paid for with	ing Monthl our bankro bankruptc non-cash	ly Expenses uptcy filing date unless y y is filed. If this is a supp government assistance is	lemental <i>Schedule</i> f you know	orm as a e <i>J</i> , check	supple: the bo	ment in a Cha x at the top c	apter 13 case to report of the form and fill in the
	ficial Form 1		id nave inc	ciuded it on <i>Scriedule I:</i> 1	our income		_	Your expe	enses
4.	payments a	nd any rent for th		ses for your residence. In or lot.	nclude first mortgag		\$		1,200.00
	If not inclu	ded in line 4:							
		estate taxes		1- 1		4a.			0.00
		erty, homeowner' e maintenance re		's insurance .pkeep expenses		4b. 4c.	·		14.00 0.00
		eowner's associa				4d.			0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

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Debtor 1 Justin G. Abraham Debtor 2 Jessica L. Abraham Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 150.00 6b. Water, sewer, garbage collection 6b. \$ 42.00 Telephone, cell phone, Internet, satellite, and cable services 6c. 6c. \$ 132.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 400.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 0.00 Personal care products and services 10. \$ 0.00 Medical and dental expenses 11. 150.00 12. Transportation. Include gas, maintenance, bus or train fare. 200.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 200.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 172.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 180.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 375.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. \$ 17d. Other. Specify: 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 3,215.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 3,215.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,818.00 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 3,215.00 Subtract your monthly expenses from your monthly income. -397.00 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.

☐ Yes.

Explain here:

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Fill in this infor	mation to identify your	case:		
Debtor 1	Justin G. Abraha	m		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica L. Abrah	am		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing
Official Form		ın Individual	Debtor's Schedule	es 12/15
f two married pe	eople are filing togethe	er, both are equally respo	nsible for supplying correct inform	ation.
obtaining money		n connection with a bank		false statement, concealing property, or co \$250,000, or imprisonment for up to 20
Sign	n Below			
Did you pa	y or agree to pay some	eone who is NOT an attor	ney to help you fill out bankruptcy	forms?
■ No				
☐ Yes. I	Name of person			otcy Petition Preparer's Notice, Declaration, Official Form 119).
	lty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with this	declaration and
X /s/ Jus	tin G. Abraham		X /s/ Jessica L. Abraha	ım
	G. Abraham		Jessica L. Abraham	
Signatu	re of Debtor 1		Signature of Debtor 2	

Date March 2, 2016

Date March 2, 2016

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Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property state or terri										
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Debtor 2 (Spouse Filting) Jessica L. Abraham First Name Mode Name Last Name	Debto	or 1			lo Nomo	1.	nat Nama			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if horower) Check if this is an amended filing	Debto	or 2			e Name	L	ast Name			
Case number (# known) Check if this is an amended filing					le Name	Li	ast Name			
Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Pebtor 2 Prior Address: Dates Debtor 3 Prior Address: Dates Debtor 4 Prior Address: Dates Debtor 5 Prior Address: Dates Debtor 6 Prior Address: Dates Debtor 6 Prior Address: Dates Debtor 7 Prior Ad	Unite	d States Bar	nkruptcy Court for the:	NORTHE	ERN DISTRICT (OF ILLING	OIS			
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	Г] No								
Debtor 1 Debtor 2		Yes. Fill	in the details.							
Debtor 2				Dobtor 1				Dobtor 2		
Sources of income Gross income Sources of income Gross income					f income	Gross	s income		A	Gross income
Check all that apply. (before deductions and Check all that apply. (before deductions)						(befor	e deductions and			(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,259.00 Under the Wages, commissions, bonuses, tips				_			\$4,259.00		sions,	\$0.00
☐ Operating a business ☐ Operating a business				☐ Operatir	ng a business			☐ Operating a busi	iness	

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Jessica L. Abraham Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) \$0.00 \$3,832.00 ☐ Wages, commissions, ■ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$37,143.00 \$0.00 Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$42,327.00 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$79,819.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$0.00 \$0.00 ☐ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 **Gross income** Sources of income Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions and exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1

Justin G. Abraham

Case 16-07199 Doc 1 Filed 03/02/16 Entered 03/02/16 09:55:22 Desc Main Page 39 of 57 Document Debtor 1 Justin G. Abraham Debtor 2 Jessica L. Abraham Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

Nο

Yes. Fill in the information below.

Creditor Name and Address Describe the Property Date Value of the property Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was **Amount** taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

П Yes Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	btor 1 Justin G. Abraham btor 2 Jessica L. Abraham		Case number	er (if known)			
Par	rt 5: List Certain Gifts and Contribution	ıs					
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more	e than \$600 per person	?		
	Gifts with a total value of more than \$60 per person		Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity		
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value		
Par	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankru disaster, or gambling?	iptcy o	r since you filed for bankruptcy, did you lose a	nything because of the	t, fire, other		
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Includ	ibe any insurance coverage for the loss e the amount that insurance has paid. List ng insurance claims on line 33 of Schedule A/B: rty.	Date of your loss	Value of property lost		
Par	tt 7: List Certain Payments or Transfers	S					
16.	consulted about seeking bankruptcy or	prepari	lid you or anyone else acting on your behalf pa ing a bankruptcy petition? rs, or credit counseling agencies for services requi		rty to anyone you		
	□ No■ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090		Attorney Fees	9/9/15- 12/9/15	\$1,315.00		
17.	. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.						
	■ No						
	Yes. Fill in the details.		Description on develop	Data wa			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		

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Case number (if known)

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and very property transfer		Describe any property or payments received or debt paid in exchange	Date transfer was made				
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called <i>asset-protection devices</i> .) No								
	☐ Yes. Fill in the details.								
	Name of trust	Description and v	alue of the prop	perty transferred	Date Transfer was made				
Par	8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Sto	orage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or Date account was closed, sold, moved, or transferred	Last balanc before closing o transfe				
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, an	y safe deposit box or other de	pository for securities,				
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit	or place other than you	home within 1	year before you filed for bankr	uptcy				
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Do you still have it?							
Par	9: Identify Property You Hold or Control	I for Someone Else							
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any propert	y you borrowed from, are stori	ng for, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Valu				
Par	10: Give Details About Environmental Inf								

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

Debtor 2

Jessica L. Abraham

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Debtor 1 Justin G. Abraham
Debtor 2 Jessica I. Abraham

Case number (if known)

Dei)lOI Z	Jessica L. Abranam		Cas	Se Humber (# known)			
		c substances, wastes, or material into llations controlling the cleanup of thes		ndwa	ter, or other medium, including s	tatutes or		
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or u to own, operate, or utilize it, including disposal sites.							
		<i>ardous material</i> means anything an en ardous material, pollutant, contaminan		ıs wa	ste, hazardous substance, toxic	substance,		
Rep	ort a	Il notices, releases, and proceedings the	hat you know about, regardless of who	en the	ey occurred.			
24.	Has	any governmental unit notified you that	at you may be liable or potentially liabl	le und	der or in violation of an environm	ental law?		
		No Yes. Fill in the details.						
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)	nd	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No							
		es. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No						
	Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	r Connections to Any Business					
27.	With	nin 4 years before you filed for bankrup	otcy, did you own a business or have a	any of	the following connections to an	y business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to	Part 12.					
		Yes. Check all that apply above and fi	ill in the details below for each busines	ss.				
		siness Name	Describe the nature of the business		Employer Identification number			
		Iress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed			

Part 12: Sign Below

Name

Address

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial

Date Issued

institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

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Justin G. Abraham Debtor 1 Debtor 2 Jessica L. Abraham Case number (if known)

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Justin G. Abraham /s/ Jessica L. Abraham Justin G. Abraham Jessica L. Abraham Signature of Debtor 1 Signature of Debtor 2 Date Date March 2, 2016 March 2, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor				
Debtor 1	Justin G. Abrahai	n		
	First Name	Middle Name	Last Name	
Debtor 2	Jessica L. Abraha	am		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Pnc Bank	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of property securing debt: 2013 Chevrolet Equinox PNC Secured Lien \$25,035.00	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
· · · · · · · · · · · · · · · · · · ·		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal pr	operty leases	Will the lease be assumed?	
Lessor's name: Description of leased Property:		□ No	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
Lessor's name: Official Form 108	Statement of Intention for Individuals Filing Under Chapter 7	pag	e

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B8 (Fo	rm 8) (12/08)			Page 2
,	ription of leased			□ No
Пор	ory.			☐ Yes
	or's name: ription of leased			□ No
Prope	•			☐ Yes
	or's name: ription of leased			□ No
Prope	•			☐ Yes
	or's name: ription of leased			□ No
Prope				☐ Yes
	or's name:			□ No
Prope	ription of leased erty:			☐ Yes
Part 3	3: Sign Below			
	r penalty of perjury, I declare that I have indicated my intention rty that is subject to an unexpired lease.	about ar	ny property of my estate that se	cures a debt and any personal
X	/s/ Justin G. Abraham	X /s/	/ Jessica L. Abraham	
	Justin G. Abraham Signature of Debtor 1		essica L. Abraham gnature of Debtor 2	
	Date March 2, 2016	Date	March 2, 2016	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-07199 Doc 1 Filed 03/02/16 Entered 03/02/16 09:55:22 Desc Main Document Page 50 of 57

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United States Bankruptcy Court Northern District of Illinois

т		Justin G. Abra				C	N		
In	- -	Jessica L. Ab	rahar	m	Debtor(s)		se No. apter	7	_
		DIC	CT (OSLIDE OF COM	PENSATION OF ATT	ODNEV EO	D DI	ERTAD(S)	
1.	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation o 				filing of the petition in bankrup	tcy, or agreed to l	be paid	to me, for services rendered or t	Э
		For legal servic	es, I h	nave agreed to accept		\$		1,315.00	
					ved			1,315.00	
		Balance Due				\$		0.00	
2.	The	e source of the co	mpens	sation paid to me was:					
		Debtor		Other (specify):					
3.	The	e source of compe	ensatio	on to be paid to me is:					
		Debtor		Other (specify):					
4.		I have not agreed	d to sh	hare the above-disclosed o	compensation with any other per	son unless they ar	e mem	bers and associates of my law fir	m.
					pensation with a person or perso e names of the people sharing in			or associates of my law firm. Anched.	
5.	In	return for the abo	ve-dis	sclosed fee, I have agreed	to render legal service for all asp	pects of the bankr	uptcy o	case, including:	
	b. c.	Preparation and f Representation of [Other provisions Negotiation agreement	iling of the design as new metalons were the construction of the c	of any petition, schedules debtor at the meeting of creeded] vith secured creditors	rendering advice to the debtor in , statement of affairs and plan whe reditors and confirmation hearing to reduce to market value; eded; preparation and filing rods.	hich may be requi g, and any adjourn exemption pla	red; ned hea nning	urings thereof;	
б.	Ву	Represen	tatio		ed fee does not include the follow y dischargeability actions, j eeding.		oidanc	es (except in Chapter 13	
					CERTIFICATION				
this		ertify that the fore kruptcy proceeding		is a complete statement of	of any agreement or arrangement	for payment to m	e for re	epresentation of the debtor(s) in	
	Mar	ch 2, 2016			/s/ David M. Si	iegel			
-	Date	•			David M. Siege Signature of Atto	el orney el & Associates Drive	6		

(847) 520-8100 Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

H.

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ 1,650

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

opportu	unity to ask questions regard	ing this agreement, is satisfied with it, and accepts it in its entirety.
Date:	11/3/15	Signed: At cer
		Print: Justin Abraham
Date:	11/3/15	Signed: Je Som Obraham
Date:	11/3/15	Print: Signed:
***************************************	осенничний менения в принципального в пр	Attorney for David M. Siegel

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United States Bankruptcy Court Northern District of Illinois

In re	Justin G. Abraham Jessica L. Abraham		Case No.		
		Debtor(s)	Chapter 7		
	VE	ERIFICATION OF CREDITOR N	MATRIX		
		Number of	Number of Creditors:		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	March 2, 2016	/s/ Justin G. Abraham Justin G. Abraham			
		Signature of Debtor			
Date:	March 2, 2016	/s/ Jessica L. Abraham			
		Jessica L. Abraham			
	Signature of Debtor				

A T Dental, Dr T M Patel Dds Attn:Bankruptcy 1507 Jefferson St Joliet, IL 60435

ACL Laboratories PO Box 27901 West Allis, WI 53227

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AT&T Bankruptcy Dept 6021 S. Rio Grande Ave, 1st Floor Orlando, FL 32809-4613

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Breehan Hurley 4136 Oak Tree Lane Plainfield, IL 60585

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Chasecard
Bankruptcy Department
PO Box 15298
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Collection Prof/lasalle Po Box 416 La Salle, IL 61301 comenity
Attn: Bankruptcy
Po Box 182686
Columbus, OH 43218

Comenity Bank/Torrid Attention: Bankruptcy Po Box 182686 Columbus, OH 43218

Comenitycapital/dvdsbr Po Box 182120 Columbus, OH 43218

Comenitycapital/prdsgn 4590 E Broad St Columbus, OH 43213

Credit One Bankrupcty Department PO Box 98873 Las Vegas, NV 89193

Enhanced Recovery Corp Attention: Client Services 8014 Bayberry Rd Jacksonville, FL 32256

First Premier Bank Bankruptcy Department PO Box 5523 Sioux Falls, SD 57117

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

Fox River Foot Ankle Cente 3963 US-34 Oswego, IL 60543

High Tech Medical Park 11800 Southwest Hwy Suite 1 Palos Heights, IL 60463 Hinsdale Orthopaedics Attn: Medical Records Billing 951 Essington Rd. Joliet, IL 60435

Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Kohl/Cap1 PO Box 6497 Sioux Falls, SD 57117

Kohl/Chase (Kohl's Department Store) Attn: Bankruptcy Department N54W 17000 Ridgewood Drive Menomonee Falls, WI 53051

Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Morris Hospital 150 W. High Street Morris, IL 60450

Northwestern Medical Professional Billing Dept 680 North Lake Shore Dr. Ste 100 Chicago, IL 60611

Northwestern Memorial Hospital PO Box 73690 Chicago, IL 60673-7690

Palos Community Hospital 777 Oakmont Lane Suite 1600 Westmont, IL 60559-5577 Pnc Bank 2730 Liberty Ave Pittsburgh, PA 15222

Pro-Motion Physical Therapy 1010 S Ridge Road Minooka, IL 60447-8810

State Collection Servi 1851 S Alverno Rd Manitowoc, WI 54220

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